



Complete and send this form, together with applicable fee(s), to: Mail

Commissioner for Patents
Washington, D.C. 20231

Fax (703)746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where

ap	propriate. All further co dicated unless corrected aintenance fee notificatio	prrespondence including the below or directed otherworks.	ne Patent, advance orders ise in Block I, by (a) sp	and notification ecifying a new co	of maintenance orrespondence ac	fees idress	will be mailed to the curren; and/or (b) indicating a sep	t correspondence addressarate "FEE ADDRES"	ess as S" for	
	CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Bi				Fee(s) Transr	mittal.	f mailing can only be used f This certificate cannot	be used for any of	other	
	RICHARD D EG				accompanying formal drawing	pape g, mu	rs. Each additional paper, at have its own certificate of	such as an assignmer mailing or transmissior	at or a.	
	JONES O'KEEFE			_	•		rtificate of Mailing or Tran			
•		F TEXAS HIGHWA ITE 200	Y SOUTH OF P	E voies	I hereby certiful United States I envelope addressmitted to	C	It this Fee(s) Transmittal is Service with sufficient posts to the Box Issue Fee address SPTO, on the date indicated by	The first of the section of the sect	the in an imile	
	71001111, 171 707	10	NUG 1	8. SOUT ( R)			,	(Depositor's		
			ABO .	<b>E</b>				(Sig	gnature)	
			TEN	A REPORT OF THE PARTY OF THE PA					(Date)	
Г	APPLICATION NO.	FILING DATE		T NAMED INVEN	TOR		ATTORNEY DOCKET NO.	CONFIRMATION N	Ю.	
_	09/034,453	03/04/1998		IERRELL P. HEII	1		SILA:019	3365		
	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBL	CATION FEE		TOTAL FEE(S) DUE	DATE DUE		
	nonprovisional	YES	\$640		\$0		\$640	10/02/2002		
Г	EXAMI	NER	ART UNIT	CLASS-SUBCL	ASS					
_	SINGH, RAM	NANDAN P	2644	379-39901	0					
<u> </u>	. Change of corresponder	nce address or indication o	f "Fee Address" (37	2. For printing	on the patent fr	ont p	age, list (1)			
	FR 1.363).		`		to 3 registered	pate	nt attorneys O'Keef	e, Egan &		
	☐ Change of correspond Address form PTO/SB/1	lence address (or Change o 22) attached.	f Correspondence	single firm (ha	ving as a mem	ber a	registered Pet	erman, LLP		
	☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3	ASSIGNEE NAME ANI	D RESIDENCE DATA TO	BE PRINTED ON THE	PATENT (print o	r type)					
b	LEASE NOTE: Unless a een previously submitted A) NAME OF ASSIGNE	I to the USPTO or is being	submitted under separate	ill appear on the percent cover. Completion (CITY)	n of this form is	NOT	ignee data is only appropria a substitute for filing an assi JNTRY)	te when an assignment gnment.	: has	
	Silicon Lab	oratories Inc.	. A	ustin, Té	kas ·					
Ple	ase check the appropriate	e assignee category or cate	gories (will not be printed	d on the patent)	☐ individual	250	corporation or other private g	roup entity 🛚 govern	ment	
4a.	The following fee(s) are	enclosed:	•	ment of Fee(s):						
L	Issue Fee			eck in the amount	. ,					
	Publication Fee	e.	•	nent by credit card				eredit any overnayment	t to	
	Advance Order - # of C	Copies	Deposi	t Account Number	10-1205	(	harge the required fee(s), or cenclose an extra copy of this	form).	.,	
Co	mmissioner for Patents is	s requested to apply the Iss	ue Fee and Publication Fe	ee (if any) or to re-	app!y any previ	ously	paid issue fee to the applicat	ion identified above.		
(A	uthorized Signature)	,	(Date)							
_		m	8/12/0	ス						
oi ir	ther than the applicant; terest as shown by the re	d Publication Fee (if requestreed attorney or ecords of the United States	agent; or the assignee of Patent and Trademark Of	r other party in						
oi ap es ca su P	his collection of information or retain a benefit polication. Confidentialit stimated to take 12 minu ompleted application for asse. Any comments on aggestions for reducing atent and Trademark Off OT SEND FEES OR ommissioner for Patents.	ation is required by 37 Cl by the public which is to y is governed by 35 U.S.C tess to complete, including m to the USPTO. Time the amount of time you this burden, should be ser fice, U.S. Department of C COMPLETED FORM: Washington, DC 20231.	FR 1.311. The information of file (and by the USPTC in 122 and 37 CFR 1.14. To gathering, preparing, and will vary depending upon a require to complete that to the Chief Informatic Commerce, Washington, S. TO THIS ADDRES	on is required to to to process) an office of this collection is disubmitting the name of the individual nis form and/or on Officer, U.S. D.C. 2023 I. DO S. SEND TO:						

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to:

**Box ISSUE FEE** 

Assistant Commissioner for Patents

Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block

7590

11/30/2001

RICHARD D EGAN
JONES O'KEEFE & EGAN
1101 CAPITAL OF TEXAS HIGHWAY SOUT
BUILDING C SUITE 200

BUILDING C SUITE 200 AUSTIN, TX 78746 Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the
United States Postal Service with sufficient postage for first class mail in an
envelope addressed to the Box Issue Fee address above on the date
indicated below.

Diane Potts (Depositor's name (Signature 1-23-02)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/034.453	03/04/1998	JERRELL P. HEIN	SILA:019	3365	

TITLE OF INVENTION: SEPARATION OF RING DETECTION FUNCTIONS ACROSS ISOLATION BARRIER FOR MINIMUM POWER

TOTAL CLAIMS	APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
24	nonprovisional	YES	\$640	02	\$640	02/28/2002
EXA	AMINER	ART UNIT	CLASS-SUBCLAS	s		
SINGH. R	AMNANDAN P	2644	379-399010			
USE 01 PT out not required.  Change of corresponded PTO/S	O form(s) and Custome ondence address (or Cha B/122) attached. cution (or "Fee Address'	tion of "Fee Address" (37 r Number are recommended nge of Correspondence ' Indication form	the names of up to or agents OR, alte single firm (havin attorney or agent)	the patent front page, I is a registered patent atternatively, (2) the name g as a member a regi and the names of up torneys or agents. If no fill be printed.	of a stered peterm	Egan & an, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Silicon Laboratories Inc.

Austin, Texas

Please check the appropriate assignee category or categories (wi	Il not be printed on the patent)	individual ا	☑ corporation or other private group entity	⊔ government					
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):								
¥ issue Fee	M A check in the amoun	MA check in the amount of the fee(s) is enclosed.							
☐ Publication Fee	U Payment by credit can	d. Form PTO-2038	3 is attached.						
& Advance Order - # of Copies9	is hereby authorized by charge the required fee(s), or credit any overpayment, to her $10-1205$ (enclose an extra copy of this form).								
The COMMISSIONER OF PATENTS AND TRADEMARKS is	The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) to the application identified above.								
NOTE: The Issue Fee and Publication Fee (if required) will other than the applicant; a registered attorney or agent; or interest as shown by the records of the United States Patent and	the assignee or other party in								
Burden Hour Statement: This form is estimated to take 0.2 hou depending on the needs of the individual case. Any comments to complete this form should be sent to the Chief Information and Trademark Office, Washington, D.C. 20231. DO NOT SE FORMS TO THIS ADDRESS. SEND FEES AND THIS Assistant Commissioner for Patents, Washington, D.C. 20231	on the amount of time required  Officer, United States Patent  END FEES OR COMPLETED		•						
Under the Paperwork Reduction Act of 1995, no persons collection of information unless it displays a valid OMB contro	are required to respond to a l number.								

TRANSMIT THIS FORM WITH FEE(S)

Page 2 of 3